



Identifying and Eliminating Disparities in Tobacco Use Through a Cross-Cultural Workshop

Public Health Problem

In 2000, an estimated 21% of adults in Washington were reported to smoke cigarettes, but among some subpopulations the prevalence was much higher: for example, 37% among American Indians/Alaska Natives. In large part, this disparity may be attributed to limited access to tobacco prevention and control resources.

Evidence That Prevention Works

In Washington, state-funded county-based programs have shown measurable progress in meeting statewide tobacco control objectives, including large declines in per capita cigarette consumption. Future efforts directed at identifying and eliminating disparities in smoking rates will build on this infrastructure and establish new capacity within underserved communities, where populations are often heavily targeted by tobacco industry marketing. The state has learned that community-based nongovernmental community organizations are generally more effective at reaching local populations than are state or local governments.

Program Example

The Washington Department of Health convened a Cross-Cultural Workgroup on Tobacco to identify populations disparately affected by tobacco use. The membership includes representatives from organizations working with African American, American Indian, Asian American/Pacific Islander, Hispanic/Latino, gay-lesbian-bisexual-transgender, pregnant, low-income, and faith-based populations. Using CDC and state funds, Washington is developing a strategic plan to identify and reduce tobacco-related disparities and a marketing plan to educate community leaders of diverse populations about the strategic plan and to engage them in its implementation. During the strategic planning process, the state program funded six populations to assess their capacity and readiness to implement tobacco prevention and control activities and evaluated the strategic planning process.

Implications

Securing meaningful participation in the strategic planning process from a broad range of population groups will enable Washington's Department of Health to identify the groups experiencing the most pronounced tobacco-related disparities. This program demonstrates the importance of developing culturally and contextually appropriate interventions to reduce health disparities.